

Base Budget Reductions - Health & Human Services

Ref. #	Line Item*	Reduction Name	FY 2010 Appropriation (Total Funds)	FY 2009 General Fund Reduction	FY 2009 Other Funds Reduction	FY 2010 General Fund Reduction	FY 2010 Other Funds Reduction	FY 2010 Client Contributions	FTEs Filled	FTEs Vacant	Clients Affected	Impact	Additional Legislation Required?
B1	DAAS	DHS - Eliminate Long-term Care Ombudsman	\$ 405,000	\$ 202,500	\$ 75,800	\$ 405,000	\$ 151,600	\$ -	4.5	-	4,400	Eliminates long-term care ombudsman function that investigates 4,347 complaints annually regarding vulnerable adults and the elderly and mediates resolutions. Eliminates 4.5 FTE at the state level. Counties would retain 11 to 13 FTE.	No
B2	DAAS	DHS - End General Fund Pass-thru for Meals on Wheels	\$ 2,400,000	\$ 1,150,000	\$ -	\$ 2,300,000	\$ -	\$ 866,000	0.0	-	8,200	Eliminates home meal service for a significant portion of the senior population who have already qualified by being identified as being at high malnutrition risk and having an inability to provide for themselves (8,200 out of 13,000). By leaving approximately \$100,000 in state funding, we are able to continue receiving federal funds for a similar purpose (\$1.4 million).	No
B3	DAAS	DHS - End General Fund Pass-thru for Senior Center Meals	\$ 215,000	\$ 57,500	\$ -	\$ 115,000	\$ -	\$ 112,500	0.0	-	3,100	Restrict meal service at the senior centers around the state, and depending on the area agency, will result in some overall reduction in meals available either through capping the number of meals served in a given day, or reducing the number of days meals are available at centers, or both. This will vary depending on the individual agency's means of dealing with the reduction but could eliminate approx. 3,100 meals out of 31,000 total. Approx. \$2 million in federal funds will remain for this purpose.	No
B4	DAAS	DHS - Reduce Aging Funding Sent Through to Counties	\$ 720,000	\$ 360,000	\$ -	\$ 720,000	\$ -	\$ -	0.0	-	0	These are flexible funds passed through to local aging authorities to help them deal with administering the state pass through funds. So the impact would vary based on local decisions. \$120,000 of this amount, however, is for a volunteer services program. Some reported uses of funds include some services as well as various senior center operation costs such as utilities and staff.	No
B5	DAAS	DHS - Provider Rate Reduction - Local Aging - rollback FY09 rate increase	\$ 250,200	\$ 125,100	\$ -	\$ 250,200	\$ -	\$ -	0.0	-	0	Rollback rates to Local Aging funded in the 2008 General Session. Rate increase was 3% calculated on 100% of the state funding base.	No
B6	DAAS	DHS - Eliminate General Fund for Nursing Home Alternatives	\$ 2,949,700	\$ 1,474,900	\$ -	\$ 2,949,700	\$ -	\$ 47,250	0.0	-	836	Eliminates services for the Gen. Fund portion of the Alternatives program which serves a vulnerable senior population who may be at high risk of requiring nursing home care if services are not provided in the home. By program definition, these are services individuals are unable to perform themselves. Elimination of services for 836 out of 1,1,00.	No
B7	DCFS	DHS - Reduce mileage rate to 36 cents from 50.5 per mile	\$ 20,000	\$ 20,000	\$ -	\$ 40,000	\$ -	\$ -	0.0	-	0	Would mean less mileage reimbursement to DCFS employees - many of which prefer to use their own private vehicle for work-related visits rather than a state vehicle. DCFS has been told by state Finance that it has the authority to make this change.	No
B8	DCFS	DHS - Provider Rate Reduction - Child & Family Services - rollback FY09 rate increase	\$ 1,671,000	\$ 835,500	\$ 490,700	\$ 1,671,000	\$ 981,300	\$ -	0.0	-	0	Rollback rates to DCFS providers funded in the 2008 General Session. Rate increase was 3% calculated on 100% of the state funding base.	No
B9	DSAMH	DHS - End DORA for 1,400 Offenders	\$ 4,683,300	\$ 2,341,700	\$ -	\$ 4,683,300	\$ -	\$ -	0.0	-	1,400	This would eliminate funding for the treatment portion of the Drug Offender Reform Act (DORA) for 1,400 out of 1,400 offenders. (S.B. 50, 2007 GS, Sen. Buttars)	63-25a-203 & 205.5, 77-18-1 & 1.1, 77-27-9
B10	DSAMH	DHS - Autism Preschool for 200 families	\$ 1,900,000	\$ 950,000	\$ -	\$ 1,900,000	\$ -	Local	0.0	-	200	200 children out of 200 would lose their state funding for autism preschool services. Services funded through 4 contracts covering 9 counties.	No
B11	DSAMH	DHS - Children's Center Mental Health Grant	\$ 50,000	\$ 25,000	\$ -	\$ 50,000	\$ -	Local	0.0	-	26	The contract with the Children's Center provides for training, supervision, and consultation.	No
B12	DSAMH	DHS - Reduce Local Mental Health Funding	\$ 25,000,000	\$ 4,350,000	\$ -	\$ 8,639,700		Local	0.0	-	14,100	Avg. state funding cost of \$617 in Gen. Fund per client per year with \$2,213 in other funds per client per year at local level. There will be maintenance of effort (MOE) issues with the federal block grant of \$2.2 million. Local Authorities would lose substantial Medicaid funding due to an inability to provide matching funds. May need to change or alter state statute depending upon the depth of the reduction. Affects 14,100 out of 40,000 recipients.	Elimination would require a statutory change to eliminate the mental health requirements per State Statute 62A-15-103 specifically and the 17-43-201 through 17-43-306 are applicable.
B13	DSAMH	DHS - Provider Rate Reduction - Local Mental Health - rollback FY09 rate increase	\$ 788,700	\$ 394,400	\$ -	\$ 788,700	\$ -	\$ -	0.0	-	0	Rollback rates to Local Mental Health funded in the 2008 General Session. Rate increase was 3% calculated on 100% of the state funding base.	No
B14	DSAMH	DHS - Close State Hospital Beds	\$ 40,751,900	\$ 1,250,000	\$ -	\$ 2,500,000	\$ -	\$ -	42.0	-	30	This reduction would require closing 30 out of 182 adult beds at the State Hospital for seriously mentally ill individuals and a reduction of 42 FTE out of 799 FTE. May take up to 60 days to complete. May require change in statutory bed allocation. May result in increased inpatient costs for local mental health centers.	No
B15	DSAMH	DHS - Substance Abuse Prevention	\$ 2,000,000	\$ 1,039,000	\$ -	\$ 2,078,000	\$ -	Local	1.0	-		There would be some issues with federal maintenance of effort (MOE) requirements. Eliminates 1 FTE at state level.	Yes - This would require a statutory change to eliminate

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B16	DSAMH	DHS - Local Substance Abuse Treatment	\$ 10,110,100	\$ 4,282,500	\$ -	\$ 8,876,300	\$ -	Local	2.0	-	7,088	The average state funding cost per recipient is \$507. A reduction of this size will create federal maintenance of effort (MOE) issues for the \$12.9 million federal treatment funds where it is a dollar for dollar loss. May affect local draw down of \$6.3 million in Medicaid because of inability to provide a match. Eliminates 2 FTE at state level. Estimated individuals affected would be 7,088 out of 17,389 total.	This would require a statutory change to eliminate substance abuse treatment requirements per State Statute. 62A-15-103 specifically and then 17-43-201 thru 17-43-306 are applicable.
B17	DSAMH	DHS - Provider Rate Reduction - Local Substance Abuse - rollback FY09 rate increase	\$ 298,500	\$ 149,200	\$ -	\$ 298,500	\$ -	\$ -	0.0	-	0	Rollback rates to Local Substance Abuse funded in the 2008 General Session. Rate increase was 3% calculated on 100% of the state funding base.	No
B18	DSAMH	DHS - Eliminate Drug Board	\$ 350,900	\$ 175,400	\$ -	\$ 350,900	\$ -	\$ -	0.0	-	1,190	Drug board provides an alternative to incarceration. Elimination of this program would require a statutory change. Eliminates services to 1,190 out of 1,190.	Yes
B19	DSPD	DHS - Provider Rate Reduction - Disabilities - rollback FY09 rate increase	\$ 1,180,200	\$ 590,100	\$ 1,400,100	\$ 1,180,200	\$ 2,800,200	\$ -	0.0	-	0	Rollback rates to Disabilities community providers funded in the 2008 General Session. Rate increase was 3% calculated on 100% of the state funding base.	No
B20	DSPD	DHS - End Brain Injury Waiver for 106 recipients	\$ 967,900	\$ 485,000	\$ 1,118,400	\$ 967,900	\$ 2,236,700	\$ -	4.0	-	106	Home- and community-based services to Utahns suffering from traumatic brain injuries and their families would be suspended. As Medicaid enrollees, these individuals would continue to maintain access to institutional care as an entitlement, and may demand that institutional care as an entitlement at an annual expense approximately 30.3% greater than the equivalent home- and community-based services. Administrative rules would need to be amended. 4 FTE would be eliminated. Federal government will require a transition plan.	Administrative rules R539-1-8 and R539-1-9 (UAC) would need to be amended. §62A-5-402 may be cited by families/advocates objecting to service cuts.
B21	DSPD	DHS - End Physical Disabilities Waiver for 129 recipients	\$ 615,600	\$ 307,800	\$ 715,200	\$ 615,600	\$ 1,430,300	\$ -	3.0	-	129	Home- and community-based services to Utahns suffering from disabling physical disabilities, and their families, would be suspended. As Medicaid enrollees, these individuals would continue to maintain access to institutional care as an entitlement, and may demand that care as an entitlement at an annual expense approximately 30.3% greater than the equivalent home- and community-based services. Administrative rules would need to be amended. 3 FTE would be eliminated. The federal government will require a transition plan.	Administrative rules R539-1-6 and R539-1-7 (UAC) would need to be amended. §62A-5-402 may be cited by families/advocates objecting to service cuts.
B22	DSPD	DHS - End Disability Services for 262 Non-Medicaid recipients	\$ 531,400	\$ 265,700	\$ 21,300	\$ 531,400	\$ 42,500	\$ 11,500	1.0	-	262	Services to Utahns and their families with intellectual disabilities, including autism, would be suspended. While these individuals bear no Medicaid entitlement for institutional care, the disruption of services that allow them to maintain lives with their families in their communities may result in increased utilization of services in the community, many of which would be unreimbursed. 1 FTE would be eliminated.	Administrative rules R539-1-8 and R539-1-9 (UAC) would need to be amended. §62A-5-402 may be cited by families/advocates objecting to service cuts.
B23	EDO	DHS - Provider Rate Reduction - Public Guardian - rollback FY09 rate increase	\$ 600	\$ 300	\$ 400	\$ 600	\$ 900	\$ -	0.0	-	0	Rollback rates to Public Guardian funded in the 2008 General Session. Rate increase was 3% calculated on 100% of the state funding base.	No
B24	EDO	DHS - End Employee Assistance Program	\$ 50,000	\$ 25,000	\$ 25,000	\$ 50,000	\$ 50,000	\$ -	1.0	-	364	Eliminates counseling program for employees needing assistance to deal with the stresses of the job. 1 FTE would be eliminated.	No
B25	ORS	DHS - Increase Processing Fee for Child Support Collections	\$ 9,922,100	\$ 500,000	\$ (500,000)	\$ 1,000,000	\$ (1,000,000)	\$ -	0.0	-	41,300	A per case per payment processing fee increase of \$6 for child support collections may put an additional financial burden on many low income single parent families. The fee increase would require a rule change and perhaps legislation. The fee currently is \$5. It would increase to \$11. Fee collections cannot be used to match federal funding. The fee cannot be applied to 46% of caseload who receive either TANF or Medicaid.	Requires legislation and/or rule.
B26	EDO	DOH - Travel and Current Expense-EDO		\$ 15,500	\$ -	\$ 22,700	\$ 22,700	\$ -	0.0		0	Less discretionary spending for central support staff. Computer and equipment replacement change from every 3 years to every 5 years.	No

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B27	EDO	DOH - Policy Support Personnel Reductions		\$ 10,300	\$ -	\$ 5,200	\$ 5,200	\$ -	0.0		0	Reduction in discretionary spending.	No
B28	EDO	DOH - ISF - Attorney General	\$ 219,900	\$ 7,800	\$ -	\$ 3,900	\$ 3,900	\$ -	0.0		0	Small reduction in Attorney General services.	No
B29	EDO	DOH - Trauma Brain Injury Fund	\$ 50,000	\$ 50,000	\$ -	\$ -	\$ -	\$ -	0.0		0	No current obligations, so new services/funding to brain injury victims will not be provided.	No
B30	EDO	DOH - Federal Indirect Funds Backfill		\$ 65,800	\$ -	\$ -	\$ -	\$ -	0.0		0	Less discretionary monies available for central support staff.	No
B31	EDO	DOH - Drivers' License Monies to Medical Examiner's Office				\$ 100,000			0.0		0	The Medical Examiner investigates about 200 highway deaths annually. This would use some of the drivers' license monies to fund the Medical Examiner. There appears enough extra license revenue that this will not impact anyone's service levels.	Yes
B32	EDO	DOH - 3 FTEs Historical Data Record Entry	\$ 619,100	\$ 41,700	\$ -	\$ 125,000	\$ -	\$ -	0.0	3.0	0	Eliminates 3 vacant FTE positions. Reduces the staff positions dedicated to converting older vital records to electronic formats.	No
B33	EDO	DOH - Eliminate 4.25 of 33.1 program staff FTE		\$ 46,700	\$ 46,700	\$ 140,200	\$ 140,200	\$ -	4.0	0.3	0	Reduction in central support staff, possible delays in processing information.	No
B34	EDO	DOH - Travel and Current Expense-Pro Opr		\$ 32,200	\$ -	\$ 16,100	\$ 16,100	\$ -	0.0		0	Reduction in discretionary spending. Less training via travel for staff.	No
B35	HSI	DOH - Child Care Licensing Reduction to Match Fewer Facilities	\$ 2,899,800	\$ 72,500	\$ -	\$ 217,400	\$ -	\$ -	7.0		0	19% personnel reductions to match 19% reduction in number of facilities from FY 2007 to FY 2008. The number of facilities has decreased 38% since FY 2005. The number of inspections completed dropped 22% from FY 2006 to FY 2008. In FY 2008 the State averaged 3.3 visits per facility at a cost of \$498 per visit.	No
B36	HSI	DOH - 2008 GS - Electronic Medical Records	\$ 200,000	\$ 33,000	\$ 33,000		\$ -	\$ -	0.0		0	The electronic medical record efforts were estimated to raise usage by doctors' offices from 65% to 75% in FY 2009. This reduction may mean usage will be below 75% at the close of FY 2009.	No
B37	HSI	DOH - Reduce Primary Care Grants	\$ 1,569,800	\$ 409,400	\$ -	\$ 159,200	\$ -	\$ -	0.0		0	Less funding to safety net providers of medical services. Each safety net provider grant recipient will be affected differently.	No
B38	WFA	DOH - Eliminate Workforce Financial Assistance	\$ 529,900	\$ -	\$ -	\$ 425,900	\$ 104,000	\$ -	0.3		27	No more state-funded education debt help for medical professionals to serve in underserved areas. A total General Fund cut of \$145,500 would still bring in the federal funds.	No
B39	ELS	DOH - No O&M for New Lab Because Left Unused (1x)		\$ -	\$ -	\$ 218,500	\$ -	\$ -	0.0		0	Health has already decided to stay in the old lab for another year. \$369,800 was appropriated for increased operations and maintenance of the building. The cost of maintaining the unoccupied building is only \$151,300.	No
B40	ELS	DOH - Eliminate Some Water & DEQ Tests	\$ 1,262,700	\$ 100,000	\$ -	\$ 200,000	\$ -	\$ -	4.0		0	Elimination of the following state testing capacities: E.Coli testing in water, membrane filtration testing, EPA methods 624 & 625, mercury in fish and other wild game. The tests above are available at commercial labs at a higher cost. Additionally, the state will no longer be able to test for radioactive agents. Agencies benefiting from this service may decide to fund this capacity.	No
B41	ELS	DOH - LHD Funding for Environmental Sanitation	\$ 384,900	\$ -	\$ -	\$ 150,000	\$ -	\$ -	0.0		0	Eliminate \$12,500 to each of Utah's 12 local health departments for supporting the enforcement of Utah's 16 environmental sanitation regulations, including day care facilities, restaurants, and swimming pools.	No
B42	ELS	DOH - Slower Environmental Outbreak Response	\$ 161,400	\$ 60,000	\$ -	\$ 95,800	\$ -	\$ -	1.0		0	Reduced ability to detect, analyze and respond to major health events. The Newborn Blood Lead Surveillance Program will be terminated, which detects the level of blood lead exposure for infants.	No
B43	ELS	DOH - Reduced Education for Prescription Overdose	\$ 150,000	\$ 50,000	\$ -	\$ -	\$ -	\$ -	0.0		0	Reduction of physician and public education efforts for prescription overdoses.	No
B44	ELS	DOH - Slower Specimen Processing Time	\$ 479,500	\$ 13,300	\$ -	\$ 40,000	\$ -	\$ -	1.0		0	Slower specimen-processing times at State lab. Possible need for clients to resubmit samples if they expire before they're tested.	No
B45	ELS	DOH - No Quantity Test for Illegal Substances	\$ 793,700	\$ 35,000	\$ -	\$ 77,900	\$ -	\$ -	1.0		0	Elimination of tests that provide specific quantification levels of illegal substances for the Medical Examiner and law enforcement. Only the presence of a substance will be determined.	No

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B46	ELS	DOH - Eliminate Rabies Testing & 1 FTE	\$ 247,100	\$ 40,000	\$ -	\$ 79,000	\$ -	\$ -	1.0		0	Loss of state capability to test for rabies. Rabies tests will have to be shipped to other states, delaying test results. One alternative funding source would be to add a fee to dog and cat licenses.	No
B47	CFHS	DOH - Reduce Tobacco Cessation Programs	\$ 7,155,600	\$ 1,662,500	\$ 70,000	\$ 4,387,500	\$ 280,000	\$ -	0.5		0	Reduction in contracts to organizations providing quitting services, education, and/or no smoking policy support. End of large-scale media outreach to reduce tobacco usage.	Yes
B48	CFHS	DOH - End Cervical Cancer Outreach (HB 358, 2007 GS, Morgan)	\$ 25,300	\$ 23,000	\$ -	\$ 25,000	\$ -	\$ -	0.0		0	Eliminate public and provider education outreach efforts for cervical cancer.	No
B49	CFHS	DOH - Baby Your Baby Licensing Rights		\$ 30,000	\$ -	\$ 20,000	\$ -	\$ -	0.0		0	Less dollars for media advertising. These are new funds that the agency wanted to add to the BYB media campaign.	No
B50	HCF	DOH - Eliminate 8.5 of 237 Medicaid Administration FTEs		\$ 223,500	\$ 447,000	\$ 229,600	\$ 459,200	\$ -	3.0	5.5	0	Less Medicaid staff in areas of policy-making, quality review, and customer service positions. 5.5 of the 8.5 positions are currently vacant.	No
B51	HCF	DOH - Reduce Travel		\$ 5,000	\$ 10,000	\$ 5,000	\$ 10,000	\$ -	0.0		0	Less travel and training for Medicaid employees.	No
B52	HCF	DOH - Reduce Third-Party Medicaid Analysis Contracts		\$ 90,000	\$ 180,000	\$ 90,000	\$ 180,000	\$ -	0.0		0	Less flexibility to have third-party analyses performed on Medicaid payment processes and audit risk.	No
B53	HCF	DOH - Cancel Research Contract		\$ 79,000	\$ 158,000	\$ 79,000	\$ 158,000	\$ -	0.0		0	Less data for Medicaid medical professionals for use in the making of coverage policy decisions.	No
B54	HCF	DOH - End Promotion of Health Care Coverage (HB 364, 2008 GS, Holdaway)	\$ 60,000	\$ -	\$ -	\$ 60,000	\$ 60,000	\$ -	0.0		0	This money is for new outreach efforts to encourage enrollment in public service programs. Cutting this money may reduce the number of people who apply for public service.	No
B55	Medicaid	DOH - Eliminate Coverage for 660 Breast and Cervical Cancer Clients	\$ 8,645,800	\$ -	\$ -	\$ 1,679,100	\$ 6,966,700	\$ -	0.9		660	Eliminate optional eligibility group currently serving 660 clients. Most clients would not qualify for Medicaid unless they spent down their income to qualify under the spenddown category. This eligibility category was begun in the mid-1990's.	Yes
B56	Medicaid	DOH - Eliminate Optional Eligibility Categories 5,800 Clients	\$ 9,098,100	\$ 442,400	\$ 1,074,000	\$ 2,609,400	\$ 6,488,700	\$ -	1.0		5,800	This returns this category's eligibility to pre-FY 2004 levels for the aged, blind, and disabled (from 100% to 75% FPL). This would require an undetermined number of programming hours to make these changes in both the eREP and PACMIS computer systems. Includes equivalent decrease of staffing that was added in FY 2004.	Yes
B57	Medicaid	DOH - Reduce Inpatient Outlier Payment Factor		\$ 1,035,700	\$ 2,528,300	\$ 3,053,900	\$ 7,638,100	\$ -	0.0		0	This would decrease the outlier payments (higher cost) for inpatient hospital services. May impact the number of providers willing to see Medicaid clients.	No
B58	Medicaid	DOH - Change Medicaid Hospital Rates to PEHP Target Rates		\$ 2,218,100	\$ -	\$ 32,584,200	\$ -		0.0		0	Medicaid's goal is to pay 90% of PEHP hospital rates. We currently pay 97.6%. Each \$3M reduction is a 1% reduction in rates. Reinstates assessment that existed from FY 1992 to FY 1999. Replaces current General Fund with revenues from hospitals. Direct cuts to the hospital rate would result in lost federal matching revenues. This could be started sooner in FY 2009 for additional savings.	Yes
B59	Medicaid	DOH - Reduce Spenddown Category to 44% FPL 13,800 of 34,800 Clients	\$ 7,909,700	\$ 384,900	\$ 933,500	\$ 2,269,900	\$ 5,639,800	\$ -	1.0		13,800	This returns this category's eligibility to pre-FY 2004 levels from 100% to 44% (\$21,200 to \$9,300 annually for a family of 4) FPL. Clients would need to pay an additional \$485 monthly to continue to qualify under spenddown eligibility. This would require an undetermined number of programming hours to make these changes in both the eREP and PACMIS computer systems. Includes equivalent decrease of staffing that was added in FY 2004. The percentage of FPL is an arbitrary number and could be set at any level (higher or lower).	Yes
B60	Medicaid	DOH - Provider Rate Reduction - Medicaid Physicians to 7/1/08 Rates		\$ 145,700	\$ 355,700	\$ 429,700	\$ 1,074,600	\$ -	0.0		0	Takes rates back to what was paid on July 1, 2008 for physician-related Medicaid providers. May impact the number of providers willing to see Medicaid clients.	No
B61	Medicaid	DOH - Provider Rate Reduction - Medicaid Non-physician to FY 2008 Rate		\$ 1,029,900	\$ 2,514,100	\$ 6,073,600	\$ 15,190,600	\$ -	0.0		0	\$3M General Fund takes back 1/2 of rate increase given in FY 2008 to non-physician Medicaid providers. \$6M General Fund takes rates back to what was paid on July 1, 2007. May impact the number of providers willing to see Medicaid clients. This could be started sooner in FY 2009 for additional savings.	No

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B62	Medicaid	DOH - 5% Drug Reimbursement Reduction in Medicaid		\$ 983,500	\$ 2,401,000	\$ 2,900,200	\$ 7,253,600	\$ -	0.0		0	Reduction in drug reimbursement rates to pharmacies.	No
B63	Medicaid	DOH - Allow Cost Consideration in DUR Decisions		\$ 4,800	\$ 11,700	\$ 11,300	\$ 28,100	\$ -	0.0		0	For considering which drugs should be on the preferred drug list, cost would now be considered along with other drug results.	Yes
B64	Medicaid	DOH - Start Prior Authorization for PDL		\$ 500,000	\$ 1,220,600	\$ 1,474,300	\$ 3,687,400	\$ -	0.0		0	Require a prior authorization process for physicians wanting to use a drug that is not on the Preferred Drug List. Currently a physician can write "medically necessary - dispense as written" and this serves as an override to the Preferred Drug List.	Yes
B65	Medicaid	DOH - No New PCN Applicants		\$ 1,250,000	\$ 3,051,400	\$ 2,948,600	\$ 7,374,900	\$ -	0.0		0	No new applicants to the Primary Care Network. Services covered for members include primary care office visits, preventative dental work, 4 prescriptions monthly, immunizations, and routine lab services.	No
B66	LHD	DOH - Local Health Department Funding	\$ 2,497,000	\$ 187,300	\$ -	\$ 374,600	\$ -	\$ -	0.0		0	Reduction in funding to Utah's 12 local health departments for complying with minimum performance standards for public health set by the state.	No
B67	CHIP	DOH - Reduce CHIP Dental Coverage		\$ 160,000	\$ 640,000	\$ 640,000	\$ 2,560,000	\$ -	0.0		0	Revert coverage back to 2002 coverage levels. Only preventative services (cleanings and x-rays) and emergency services (damage sustained from an accident) would be covered. Fillings, crowns, and root canals would no longer be covered.	No
B68	CHIP	DOH - No New CHIP Media Outreach		\$ 30,000	\$ 120,000	\$ 70,000	\$ 280,000	\$ -	0.0		0	Less media coverage and outreach for the CHIP program.	No
B69	CHIP	DOH - New Late Premium Fee in CHIP		\$ -	\$ -	\$ 10,000	\$ 40,000	\$ -	0.0		0	New \$15 late fee for quarterly premiums that are not paid on-time. These families are currently paying \$60 quarterly premiums. May decrease the number of eligible children who will continue participating in the CHIP program.	No
B70	Various	DOH - Tobacco Settlement Account Unused Monies	\$ 3,000,000	\$ 935,500	\$ -	\$ 3,000,000	\$ -	\$ -	0.0		0	Conservative estimate of uncommitted monies available. There may be up to \$0.5 M more ongoing monies available.	Yes
B71	Various	DOH - Tobacco Settlement Trust Fund 1 Year Loan (1x)	\$ 65,000,000	\$ 7,921,900	\$ -	\$ (7,921,900)	\$ -	\$ -	0.0		0	This reduces the need for General Fund cuts in FY 2009 and increases the need in FY 2010. Money used from the trust fund in FY 2009 would be repaid in FY 2010.	Yes - 3/4 vote
B72	Various	DOH - Medicaid Restricted Account Fund Balance - Partial	\$ 16,831,900	\$ 7,362,800	\$ -		\$ -	\$ -	0.0		0	\$16.8 M is the entire balance available in the account. The fund balance is not used unless the Legislature appropriates monies out of it.	No

Total Reductions	\$ 49,145,300	\$ 19,141,900	\$ 102,141,800	\$ 72,355,300	\$ 1,037,250	84	9	103,018
Committee Targets	\$ 49,496,800		\$ 99,744,700					
Above/(Under) Targets	\$ (351,500)		\$ 2,397,100					

*Human Services Acronyms: EDO=Executive Director Operations, DSAMH=Division of Substance Abuse and Mental Health, DSPD=Division of Services for People with Disabilities, ORS=Office of Recovery Services, DCFS=Division of Child and Family Services, DAAS=Division of Aging and Adult Services

*Health Acronyms: EDO=Executive Director's Operations, HSI=Health Systems Improvement, WFA=Workforce Financial Assistance, ELS=Epidemiology & Lab Services, CFHS=Community and Family Health Services, HCF=Health Care Financing (Medicaid Admin.), CHIP=Children's Health Insurance Program, LHD=Local Health Departments